



## **CODE COMPLIANCE** **RENTAL UNIT REGISTRATION FORM**

**RENTAL REGISTRATION VALID JANUARY TO DECEMBER EACH CALENDAR YEAR**

Property Address: \_\_\_\_\_, San Marcos, TX 78666

Property Owner Name: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

Property Owner Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Property Owner Email: \_\_\_\_\_

Secondary Email: \_\_\_\_\_

Property Management Company: \_\_\_\_\_

Property Management Company Address: \_\_\_\_\_

Property Management Company Phone: \_\_\_\_\_

Property Management Company Email: \_\_\_\_\_

Number of Bedrooms per Rental Unit: \_\_\_\_\_ Gate Code: \_\_\_\_\_ (If applicable)

Local Emergency Contact: \_\_\_\_\_

Local Emergency Contact Phone: \_\_\_\_\_

Local Emergency Contact Address: \_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_

Printed name of Property Owner: \_\_\_\_\_

Date: \_\_\_\_\_

**REGISTRATION RENEWALS MUST BE PERFORMED BY JANUARY 1<sup>ST</sup> OF EACH YEAR**  
**FAILURE TO REGISTER CAN/WILL RESULT IN RENTAL REVOCATION**

Once complete return form to address below

*City of San Marcos Marshals Office 630 E. Hopkins, San Marcos, Texas, 78666*  
*Or*  
*neighborhoodservices@sanmarcostx.gov*